

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>		10/28/11
O.I.P.E. CLASSIFIER		319	11/15/11
FORMALITY REVIEW	<i>[Signature]</i>	72346	11-27-11
RESPONSE FORMALITY REVIEW	<i>[Signature]</i>	<i>[Signature]</i>	2-7-11

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
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Best Available Copy

If more than 150 claims or 10 actions  
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